

MISCELLANY

Under this department are ordinarily grouped: News Items; Letters; Special Articles; Twenty-five Years Ago column; California Board of Medical Examiners; and other columns as occasion may warrant. Items for the News column must be furnished by the fifteenth of the preceding month. For Book Reviews, see index on the front cover, under Miscellany.

NEWS

Coming Meetings

American Medical Association, Atlantic City, New Jersey, June 7-11. Olin West, M.D., 535 North Dearborn Street, Chicago, secretary.

California Medical Association, Del Monte, May 3-6. F. C. Warnshuis, M. D., 450 Sutter Street, San Francisco, secretary.

Medical Broadcasts*

American Medical Association

The American Medical Association and the National Broadcasting Company are presenting the second series of dramatized health broadcasts, under the title, "Your Health." The first broadcast in the new series, the thirty-second dramatized cooperative broadcast under the title "Your Health," was given October 13, 1936. The theme for 1936-1937 differs slightly from the topic in the first series, which was "Medical Emergencies and How They Are Met." The new series is built around the central idea that "one hundred thousand American physicians in great cities and tiny villages, who are members of the American Medical Association and of county and state medical societies, stand ready, day and night, to serve the American people in sickness and in health."

The program will be on the Blue network instead of the Red, as originally announced.

The topics are announced monthly in advance in *Hygeia*, the health magazine, and three weeks in advance in each issue of the *Journal of the American Medical Association*.

The time of the broadcast is Tuesday afternoon, two o'clock, Pacific time.

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San Francisco County Medical Society

A radio broadcast program for the San Francisco County Medical Society for the month of March is as follows:

Tuesday, March 2—KYA, 6 p. m.
Tuesday, March 9—KYA, 6 p. m.
Tuesday, March 16—KYA, 6 p. m.
Tuesday, March 23—KYA, 6 p. m.
Tuesday, March 30—KYA, 6 p. m.

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Los Angeles County Medical Association

The radio broadcast program for the Los Angeles County Medical Association for the month of March is as follows:

Tuesday, March 2—KECA, 10:30 a. m., The Road to Health.
Saturday, March 6—KFI, 9:15 a. m., The Road to Health.
Saturday, March 6—KFAC, 10:15 a. m., Your Doctor and You.
Tuesday, March 9—KECA, 10:30 a. m., The Road to Health.
Saturday, March 13—KFI, 9:15 a. m., The Road to Health.
Saturday, March 13—KFAC, 10:15 a. m., Your Doctor and You.
Tuesday, March 16—KECA, 10:30 a. m., The Road to Health.
Saturday, March 20—KFI, 9:15 a. m., The Road to Health.
Saturday, March 20—KFAC, 10:15 a. m., Your Doctor and You.
Tuesday, March 23—KECA, 10:30 a. m., The Road to Health.
Saturday, March 27—KFI, 9:15 a. m., The Road to Health.
Saturday, March 27—KFAC, 10:15 a. m., Your Doctor and You.
Tuesday, March 30—KECA, 10:30 a. m., The Road to Health.

* County societies giving medical broadcasts are requested to send information as soon as arranged (stating station, day, date and hour, and subject) to CALIFORNIA AND WESTERN MEDICINE, 450 Sutter Street, San Francisco, for inclusion in this column.

Cancer Commission Pathology Conference.—The annual pathological conference, given under the sponsorship of the Cancer Commission of the California Medical Association, will be held at the Del Monte Hotel, Del Monte, on Sunday, May 2.

The program will include a full morning and afternoon session. The plan at present is to present short symposia upon various groups of tumors, with interesting cases interspersed through the meeting. It is hoped that reports on tumors exhibited at former sessions will be made.

All those desiring to present cases and slides are requested to return the same to the chairman of the committee, Dr. Z. E. Bolin, 490 Post Street, San Francisco, at their earliest convenience, accompanied by one hundred slides and a case history which is to be mimeographed. Those who wish to participate in the conference are requested to register with chairman of the committee as soon as possible.

As in previous sessions, there will be no provision made for microscopes. Please bring your own microscope.

Annual Meeting of the California Tuberculosis Association.—A symposium on silicosis by three visiting speakers will be presented at the opening session of the annual meeting of the California Tuberculosis Association at Riverside, April 2 and 3.

Dr. Leroy U. Gardner, Director, Saranac Laboratory for the Study of Tuberculosis, Saranac Lake, New York, Dr. R. R. Sayers, United States Public Health Service, Washington, D. C., and Dr. Anthony J. Lanza, Assistant Medical Director of the Metropolitan Life Insurance Company, New York, will conduct the symposium. These sessions will be held on Friday morning, April 2.

A clinical session will be held Friday afternoon, at which time there will be papers presented as follows: "Bronchial Stenosis," Dr. Leo Eloesser; "Pneumoperitoneum," Dr. Harold Trimble and Dr. Buford Wardrip; "Bilateral Pneumothorax," Dr. Everett Morris.

On Saturday morning a second clinical session will be held. Papers will be presented on "Relationship of Trauma to Tuberculosis," by Dr. Munford Smith, and "Diagnoses of Tuberculosis of the Intestinal Tract" and "Differential Diagnosis of Diseases of the Chest."

On Friday afternoon there will be a sociological session with a paper on "Epidemiology of Tuberculosis," presented by Dr. Reginald Smart of Los Angeles, and a presentation of the problem of "Tuberculin Testing of High School Students" from the viewpoint of the medical profession, the health officer, the school administration, school physician, and the public health nurse.

A second sociological session will be held on Saturday morning, at which there will be a discussion of "Rehabilitation" and a symposium on "Public Relations." Papers will be presented on "Presentation of Health Material on the Radio," "Newspaper and Class Organs," "Speakers' Bureaus," "Silent and Talking Pictures." Discussions on this symposium will be led by Dr. F. C. Warnshuis.

The annual banquet of the Association will be held at the Mission Inn on Friday night, and the annual business meeting will be conducted at luncheon on Saturday.

The committee who have prepared the program is composed of Dr. R. H. Sundberg of San Diego, Mr. James G. Stone of Los Angeles, and the late Dr. Thomas C. O'Connor, Jr., of Stockton.

For other information, write to W. F. Higby, Executive Secretary, California Tuberculosis Association, 45 Second Street, San Francisco.

All physicians are cordially invited to attend this meeting.

New York Polyclinic Medical School and Hospital. Dr. Russell L. Cecil, professor of internal medicine at the New York Polyclinic Medical School and Hospital, gave a special afternoon lecture on Wednesday, January 13, on "Streptococcal Infections and Their Treatment."

The following program will be presented at the March meeting of the Polyclinic Clinical Society:

"The Vermiform Appendix: Its Physiology and Pathology" by Dr. H. A. Royster of Raleigh, North Carolina; "Carcinoma of the Breast," with sound films in color, by Dr. Herbert C. Chase.

Coming Conventions: Military Surgeons; Railway Surgeons; Orthopedic Surgeons.—The Association of Military Surgeons of the United States announces the appointment of Mr. Robert Lewin as director of its convention exhibits.

Mr. Lewin has very successfully directed the commercial exhibits of the American Association of Railway Surgeons and the American Association of Orthopedic Surgeons for a number of years. This year he is also directing the commercial exhibit held in conjunction with the International Fever Therapy Conference at the Waldorf-Astoria, March 29 to 31.

The commercial exhibits of the Association of Military Surgeons have been creating more attention each year, and the exhibitors have found this to be a highly profitable meeting.

Anyone desiring information in connection with the Military Surgeons 1937 convention to be held at Los Angeles, October 14 to 16, the American Association of Orthopedic Surgeons to be held at the Biltmore Hotel, Los Angeles, January 15 to 19, the American Association of Railway Surgeons meeting to be held September 21 to 22 at the Palmer House in Chicago, or the International Fever Therapy Conference, as above mentioned, should address Mr. Robert Lewin, 505 North Michigan Avenue, Chicago, Illinois.

What Happens to Medical Fees for Saving the Injured?—In the city of New York thousands of doctors draw very considerable fees from accident cases. These fees do not always come from the injured person, but oftener from the insurance companies. They are not always paid willingly or entirely, and are frequently subject to adjustment. Nearly 2,000 of such fees are in controversy in the city of New York, entailing a delay for the doctor in obtaining remuneration and for the insurance company in clearing its record.

But New York State is trying a new experiment for adjusting such fees equitably and expeditiously.

Inspired by the voluntary arbitration system of the National Bureau of Casualty and Surety Underwriters, the amendments to the New York Workmen's Compensation Act passed in 1935 contain a provision for the arbitration of disputes on medical fees.

The Compensation Insurance Rating Board, in conference with officials of the Labor Department and the American Arbitration Association, has worked out an administrative plan for making this provision effective. Under this plan the insurance carrier files an objection with the Industrial Commission, with which is also filed an agreement to arbitrate and to abide by the award which is signed by both parties to the dispute. The Rating Board then arranges for a hearing before four arbitrators, two appointed by each side from special panels of doctors that have been appointed for the purpose through the coöperation of the county medical societies. When the four arbitrators fail to agree on a decision, they select a fifth doctor whose decision then becomes final. It is anticipated that the questions arbitrated will involve not only the size of the doctor's fees, but also his competency and his disposition to follow ethical standards.

The *Arbitration Journal* (521 Fifth Avenue, New York) for January tells the story of this experiment, describes the law under which it is being made and the machinery for making such adjustments. The story is part of a symposium on Arbitration in Insurance, which portrays the whole picture of what the insurance companies and arbitration are doing to meet the problems which arise after an accident has occurred.

East Bay Hospital Conference.—The East Bay Hospital Conference, composed of all the hospitals on the approved list, as issued by the American College of Surgeons in Alameda County, held its annual meeting on January 21, at a luncheon at Peralta Hospital in Oakland.

At the election of officers which ensued, Ellard L. Slack, Superintendent of Samuel Merritt Hospital, Oakland, was elected to succeed George U. Wood, Superintendent of Peralta Hospital, Oakland, as president. Dr. Benjamin W. Black, Director of Alameda County Institutions, was elected vice-president, to succeed Miss Florence Klaeser, Superintendent of the East Oakland Hospital. Alfred E. Maffly, Superintendent of Berkeley General Hospital, was reelected secretary-treasurer.

"Giving Information to the Press," the standard code on this subject, recommended by the American Hospital Association, was adopted as a standard for all members of the Conference. Dr. Robert P. Legge, professor of hygiene and university physician of the Cowell Memorial Hospital at the University of California, spoke on "The Control of Venereal Disease" as outlined by Surgeon-General Parran, at a meeting of the United States Public Health Service held in Washington, D. C., on December 28.

Dr. Benjamin W. Black, Medical Director of Alameda County Institutions, spoke on the "Relationship of the County Hospital to the Voluntary Hospitals."

Rosenwald Fund Makes Grant for Medical Economics Study.—The Julius Rosenwald Fund has made a grant of \$165,000 over a five-year period, to the Committee on Research in Medical Economics, it was announced by Edwin R. Embree, president of the Fund. This committee has recently been incorporated in New York, with Michael M. Davis as chairman, the other members being Robert E. Chaddock, professor of statistics, Columbia University; Henry S. Dennison, president of Dennison Manufacturing Company, Farmingham, Massachusetts; Walton H. Hamilton, professor of law, Yale University, and director of Bureau of Research, Social Security Board, Washington; Elvin S. Johnson, director of New School for School Research, New York; Paul U. Kellogg, editor of *The Survey Graphic*, New York; Harry A. Millis, professor of economics, University of Chicago; Fred M. Stein, retired banker, New York.

The committee will have an Advisory Board, to be enlarged as required, the following physicians now being members: Doctors Samuel Bradbury of Philadelphia, Alfred E. Cohn of New York, Alice Hamilton of Washington, Ludwig Hektoen of Chicago, and Franklin C. McLean of Chicago.

This committee will conduct and assist studies in the economic and social aspects of medical care; will train personnel for this field; and, in coöperation with the medical profession and other agencies, will furnish information and consultation services in behalf of rendering medical care more widely available to the people at costs within their means. The committee will have headquarters in New York City.

Since 1928, Mr. Embree stated, "the Julius Rosenwald Fund has been actively at work with the aim of reducing the costs of medical services and of making them more accessible to people of small incomes. Now the organized medical profession, hospitals, and many industrial and governmental agencies are engaged in practical experiments in different parts of the country, organizing medical care to reduce costs or developing methods of getting these costs into the family budget.

"Hence there is now less need for the promotion of action than for the guidance of action through scientific and dispassionate studies. The Fund, therefore, welcomes the opportunity to make a grant of this kind to a committee of social scientists and business men, with a distinguished medical advisory board. With this grant, together with the grant of \$100,000 recently made to the American Hospital Association to promote voluntary hospital insurance, the trustees have terminated their department of medical services, believing that these two agencies will now carry forward vigorously the Fund's long-standing and successful work in this field."

Examination for Entrance into the Medical Corps of the Navy.—An examination for commission in the Medical Corps of the United States Navy and for appointment as internes in the Medical Corps of the United States Navy will be held, beginning May 10, this year. There are about fifty vacancies in the Corps to be filled. The examination will be held at all United States naval hospitals and the United States Naval Medical School, Washington, D. C.

Candidates for admission must be between the ages of 21 and 32 years at the time of appointment, graduates of or senior medical students in Class "A" medical schools only.

Those who are interested should write the Surgeon-General, United States Navy, Bureau of Medicine and Surgery, Navy Department, Washington, D. C., for further information in regard to the examination and the procedure to follow for them to appear before one of the examining boards.

Sewage Treatment Works in the East.—C. G. Gillespie, Chief of the Bureau of Sanitary Engineering of the California Board of Health, in a recent report stated:

"While on vacation in the East attending an engineering conference this month, the Chief of the Bureau took occasion to visit a number of the newer and larger sewage treatment and water treatment works in the vicinity of the Great Lakes and Washington, D. C. Of some sixteen sewage plants visited, ten are exceptionally large and nearly all of them have been built or under construction during the last three or four years at the following places: Minneapolis, Milwaukee, Chicago, Cleveland, New York, and Washington, D. C. These ten plants serve almost ten million people and handle from 1,000,500,000 gallons to 3,000,000,000 gallons of sewage daily. The figure represents approximately seven times the total sewage production in all of California. The investment in sewage treatment works is approximately \$65,000,000 and, in addition, there is the expense of sewage interception to reach the plants, amounting to even a larger sum. Daily operating personnel exceeds one thousand men.

"One may see in these plants, representing as they do the best wisdom of this day, practically all of the newer ideas in stream pollution abatement and sewage treatment. How experience pays is illustrated in the case of two plants of similar type and for similar purpose in one of these cities where the most recent plant saves in the neighborhood of \$7,000,000 over the cost of the earlier one.

"One cannot escape the impression that sewage treatment is now in a new era, utilizing monumental works inheriting much of the handiwork of the power plant and electrical engineer. In fact, many of the plants present the appearance of high-grade industrial enterprises surpassed by few industries in architectural embellishment and mechanical orderliness.

"Yet the impression remains that these cities have not been extravagant. The scope of works and provision for the future is consistent with the needs in each particular case. Thus, Chicago, with almost no stream for dilution, turns to activated sludge treatment, graded down, however, for the actual needs of effluent as nearly as it can be predicted. Cleveland and Milwaukee, on the other hand, with recreational lake fronts to preserve, go to the highest degree of treatment in their activated sludge plants. At the other extreme, Washington, D. C., with the broad Potomac to receive the effluent, stops at simple sedimentation. In between, fall Minneapolis and the Coney Island Plant of New York City, where the processes are intermediate in results and costs. Minneapolis drains its effluent to the Mississippi River, having a considerable summer flow, and capitalizes on it. The Coney Island Plant capitalizes on its length of outfall into the ocean to reduce the degree of its sewage treatment.

"Sludge disposal, always the bane of handling sewage, is being met on an increasing scale by filtering the water out of the sludge and incinerating the sludge cake at high temperature, the same as is done with garbage.

"Coming home to the tendencies in California, the aim is toward a higher standard on proportionately less money than is represented in these eastern plants. We would succeed better were our economic 'sights' raised a little higher so as to do the job more adequately."

Thirty-Third Annual Congress on Medical Education and Licensure.—This year's conference was held on February 15 and 16 at the Palmer House, Chicago. The program included the following papers:

MONDAY MORNING, 10:00

Ray Lyman Wilbur, M. D., Presiding

Report of the Council on Medical Education and Hospitals. Ray Lyman Wilbur, M. D., LL. D., Chairman, Stanford University, California.

The Regulation of the Professions in the Public Interest. William E. Wickenden, B. S., President, Case School of Applied Science, Cleveland.

The Price of Professional Liberty. Guy Stanton Ford, Ph. D., Dean, University of Minnesota Graduate School, Minneapolis.

The Medical School Survey. Herman G. Weiskotten, M. D., Dean, Syracuse University College of Medicine, Syracuse, New York.

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MONDAY AFTERNOON, 2:15

Reginald Fitz, M. D., Presiding

Report of the Survey to Individual Schools, William D. Cutter, M. D., Secretary, Council on Medical Education and Hospitals of the American Medical Association, Chicago.

Symposium on Cancer

Biology of Cancer. C. C. Little, Sc. D., Director, Roscoe B. Jackson Memorial Laboratory, Bar Harbor, Maine.

Pathology of Cancer. Francis Carter Wood, M. D., Director, Institute of Cancer Research, Columbia University College of Physicians and Surgeons, New York.

The Teaching of Cancer. Frank E. Adair, M. D., Secretary, American Society for the Control of Cancer, New York.

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MONDAY AFTERNOON, 2:45

The Federation of State Medical Boards

James N. Baker, M. D., Presiding

Medical Licensure as Related to the Practice of Medicine. Edward H. Cary, M. D., Chairman, Committee on Legislative Activities of the American Medical Association, Dallas, Texas.

The Fallacy of Spinal Adjustment. Thomas J. Crowe, M. D., Secretary, Texas Board of Medical Examiners, Dallas.

The Doctor and the Narcotic Violator. R. L. Sensenich, M. D., Past President, Indiana State Medical Association, South Bend.

A Lawyer's Point of View on the Narcotic Problem. Herman B. Carlson, Director, Division of Law Enforcement, Iowa, Department of Health, Des Moines.

Some Medical Licensure Problems of Massachusetts. Edward A. Knowlton, M. D., Member, Massachusetts Board of Registration in Medicine, Holyoke.

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TUESDAY MORNING, 9:30

Joint Session of the Council on Medical Education and Hospitals and the Federation of State Medical Boards
James N. Baker, M. D., Presiding

Symposium on the Selection of Students

Primary Mental Abilities. L. L. Thurstone, Ph. D., Professor of Psychology, University of Chicago.

Measurement of Personality. E. K. Strong, Jr., Ph. D., Professor of Psychology and of Applied Psychology, Stanford University Graduate School of Business, Stanford University, California.

The Why, What, and How of the Medical Scholastic Aptitude Test. Torald Sollmann, M. D., Dean, Western Reserve University School of Medicine, Cleveland.

Symposium on Technique of Examination

Philosophical Comments on Examinations, Howard T. Karsner, M. D., Director, Institute of Pathology, Western Reserve University, Cleveland.

Fundamental Purposes, Methodology, and Techniques of Examining in Relation to Medical Education and Licensure. Ben D. Wood, Ph. D., Associate Professor of Collegiate Educational Research, Teachers College, Columbia University, New York.

The Essay Examination on the Spot. Robert P. Dobbie, M. D., Assistant Professor of Surgery, University of Buffalo School of Medicine, Buffalo, N. Y.

TUESDAY AFTERNOON, 2:15

Charles E. Humiston, M. D., Presiding

Medicine in Education. Max Mason, Ph. D., California Institute of Technology, Pasadena, California.
 Relation of the American Medical Association to the Certification of Specialists. Charles Gordon Heyd, M. D., President, American Medical Association, New York.
 Increase in the Number of Practitioners in the Country. Harold Rypins, M. D., Secretary New York Board of Medical Examiners, Albany.
 Graduate Instruction and the State Medical Association. Charles R. Scott, M. D., Twin Falls, Idaho.

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MONDAY EVENING, 6:30

The Federation of State Medical Boards
Annual Dinner

Address: James N. Baker, M. D., President, The Federation of State Medical Boards of the United States, Montgomery, Alabama.
 Address: Licensure and the Organized Profession. Charles Gordon Heyd, M. D., President, American Medical Association, New York.
 Round-Table Discussion.

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MONDAY AFTERNOON, 12:30

Central Council for Nursing Education

Luncheon for Lay Boards of Hospitals and Public Health Nursing Organizations.
 Address: How Nursing May Promote Interprofessional Relationships. Joseph C. Doane, M. D., Philadelphia.

Regulations of the California Department of Public Health for the Prevention of Syphilis and Gonococcus Infections.—It shall be the duty of every person who gives treatment for syphilis or gonorrhea to report in writing immediately to the local health officer within whose jurisdiction such patient is, on a card supplied by the State Department of Public Health, the patient's initials, sex, and date of birth.

The local health officer shall forward these reports to the State Department of Public Health at least weekly.

The physician shall keep a record by name and address of each patient treated.

The name and address of the patient shall be reported to the local or state health official to whom the attending physician is required to report such case, upon the special request of such official if in his judgment this may be necessary to prevent the spread of the disease to other persons.

Whenever any person suffering from syphilis or gonorrhea shall discontinue treatment while, in the judgment of the attending physician, he is capable of transmitting the disease to others, such physician shall report immediately such facts together with the patient's initials and date of birth to the local or state health official to whom the attending physician is required to report such case.

Records of any local department of health or of any local health officer or of any laboratory, clinic or other institution, relating to cases of syphilis or gonorrhea, shall be confidential except in so far as may be necessary to carry out the provisions of the law and these regulations.*

Hospital Convention at Los Angeles: Hotel Biltmore, April 12 to 15.—The eleventh annual exposition and convention of the Association of Western Hospitals, Association of California Hospitals, western conferences of the Catholic Hospital Association, and allied groups and sections, will be held on April 12 to 15 at the Biltmore Hotel, Los Angeles. The preliminary program announces the following:

1. "The manifold Obligations of the Hospitals to the Public"

This session will be a searching study of how well you serve your communities. It will set standards of community service. It will tabulate your community responsibilities. It will emphasize the dignity to your profession.

The speaker will be an experienced hospital administrator able to drive home an inspirational message.

* See also article in Miscellany department, on page 212.

2. "Legislation and Hospitals"

A timely topic with the multitude of bills and laws confronting us. It is planned to stress this from the "lobby" or "pressure-group" viewpoint. Many pressure groups are already with us. Others may be expected. This session should be very instructive to hospital administrators interested in the legislative problems of hospitals.

We plan to have a specialist in government technique present this lecture.

3. "Group Hospitalization"

(a) Is it a fact or a fancy? Has prosperity removed the necessity for it? These questions will be answered by an able speaker who will come from a plan that is working successfully.

(b) What are the helps and hindrances to its broad scale development? What is the responsibility of private hospitals? These, likewise, will be answered by a recognized authority.

4. "The Interest of the Patient Is Paramount"

Economy and budget balancing have occupied the minds and energies of administrators for several years. It is time to check up on your quality of service. Do you pass muster on scientific and sanitation facilities? These are minimums of service. Do you recognize the peculiar psychology of patients? Do your employees conduct themselves accordingly? What services do you render beyond the minimums of scientific safety and proper sanitation? There are many you must provide to really meet the true spirit of rendering hospital care to the sick. The speaker will delve deeply into this subject and should cause many administrators to recognize and develop a new sense of dignity of service in our profession. The speaker will be chosen because of experience, ability, and an appreciation for the intangible elements of service.

5. "The Growth, Causes, and Cures of Malpractice Suits"

This has always been a grievous problem to hospitals. Recently there has been a serious growth of such litigation. Some damaging decisions have been rendered recently. It is a delicate, difficult problem affecting every hospital. This session will candidly study the hazards that exist, the methods of preventing accidents, the legal procedure required to protect your institution when not at fault.

Perhaps we shall stage a pseudo trial to bring out dramatically the points of danger in such a suit. Handled by capable attorneys it will drive home its message in a new potent manner.

6. "Employee Welfare in the Broader Sense"

Leadership is a trait vitally necessary in every hospital. In the spirit of leadership, we shall discuss the importance of employee welfare. How do judgment, tact, kindness grow? Hospitals render mainly service and it is a product made only from human ingredients. We need to evaluate anew the employees' importance. New consideration must be given to this problem. This is necessary to insure the proper spirit in service to the ill, and to insure against labor disputes. We wish to avoid unionization of hospital employees.

The speaker will be a national authority on the subject. Do not miss this session. It bids to be one of your biggest days, provoke much discussion, perhaps a real debate.

Round Tables.—Each General Assembly will be followed by a one-hour round table. In this hour many can participate. Able leaders will be drafted to lead this hour of personal discussion. It is the hope of the Committee that truths can be driven home, different points of view presented, and a well-rounded conclusion carried away with each delegate. Petty issues will be ignored and vital problems emphasized.

Sectional Meetings.—Without losing the good in general assemblies, sectional meetings are being arranged without schedule conflicts. Dietitians, nurses, social workers, Auxiliary members, trustees, accountants, engineers, housekeepers, record librarians, will have programs of merit on vital hospital problems.

Exhibits.—Space for exhibits is already sold out. This feature promises to be better than ever. The latest and best will be available for your scrutiny and instruction. In four days you can get first-hand knowledge that would take months except for this convention.

Eating Habits of Past Generations Affect Our Teeth.

The modern doctor is now as much concerned about what sort of patient has the disease as he is about what sort of disease the patient has. Dr. John A. Marshall of the University of California College of Dentistry, told the members of the Los Angeles County Dental Society at a meeting held here. This necessity of studying the patient to determine habits, past ailments and hereditary defects, is coming to mean more and more in the practice of dentistry, Doctor Marshall said.

Doctor Marshall pointed out that there is some foundation of fact in the supposition that the dietary habits of the Americans of a few generations ago are having their effect upon the present generation, particularly in respect to tooth health.

"The average American of 1800 was as ignorant of food values as he was of sanitation, physiology, or anesthesia. Dairy products, vegetables, fruit, fish, and so forth, were used sparingly or were not even thought of. Whether these past dietary derelictions have had any ill effect upon the present generation is difficult to prove. However, the great number of nutrition experiments that have been carried on throughout the world indicate that such supposition has some foundation of fact."

However, Doctor Marshall pointed out, it will be a hundred years or more before the full effect of present corrective dietary systems will become apparent in human teeth.

The speaker emphasized the thought that dental diseases are not merely local lesions, unrelated to the rest of the alimentary tract, nor are they merely local manifestations of systemic diseases. "They are both, and because they are both, the etiology, the prognosis, and the treatment will always be difficult," he said. "But unfortunately the results of dental therapy—surgical, operative, dietary, and medicinal—fall far short of what we would wish."

Smiths, Johnsons, and Eight Others.—The United States Social Security Board announces that the Smiths once more have proved their numerical leadership by being the most frequent of all the names among the millions of wage-earners who will have social security accounts for participation in the federal old-age benefits program, the Social Security Board announced recently in stressing the importance of assigning a specific number to the account of every worker.

Preliminary estimates, the Board states, indicate that ten names—the Smiths, the Johnsons, the Browns, the Williamses, the Joneses, the Millers, the Davises, the Andersons, the Wilsons, and the Taylors—will constitute more than 1,500,000 of the total number of workers who will participate in the federal old-age benefits program.

The Board's Wage Records Office is setting up accounts for approximately 294,000 Smiths, 227,000 Johnsons, and 164,000 Browns. These are followed closely by the Williamses with a total of 156,000; the Joneses, 147,000; the Millers, 137,000; the Davises, 123,000; the Andersons, 115,000; the Wilsons, 96,000; and the Taylors 81,000.

If numbers for the accounts were not used, it would be necessary to obtain elaborate information about each worker on every wage report to insure accuracy in recording wages, the Board states. The use of the number makes the maintenance of such a vast system of accounts practicable and permits the use of an application blank asking for only simple information.

Estimates of the number of persons with these ten names are based on the assumption that approximately 26,000,000 wage-earners would participate in the old-age benefits program. Employers' application forms for identification number (SS-4), on file with the Board as of January 15, show that the approximate number of persons now in their employ totals 26,024,938.

The Post Office Department's count of the employee applications on file in typing centers as of December 16 was 22,129,617. Since then a large number of additional employee's applications for social security account numbers have been received daily.

Western Branch: The American Public Health Association.—The Western Branch, American Public Health Association, will hold its eighth annual meeting in Phoenix, Arizona, April 13 to 15. The program will be devoted to discussion of public health matters of special interest to the West, and will present speakers of national and western prominence.

Inquiries should be addressed to Dr. George C. Truman, State Superintendent of Public Health, Phoenix, or to Dr. W. P. Shepard, 600 Stockton Street, San Francisco.

Golden Gate Bridge Fiesta.—The completion next May of the great Golden Gate Bridge, longest suspension span ever constructed, will be the signal for a spectacular four-day celebration in San Francisco, which promises to echo round the world.

Sweeping majestically across San Francisco's famed Golden Gate, through which the Argonauts first glimpsed the land of their golden hopes eighty-eight years ago, this gigantic bridge will be among the most impressively beautiful structures built by man.

The Golden Gate Bridge Fiesta, as the opening celebration will be known, is aimed to eclipse anything of its kind ever seen in the West, and plans already advanced call for a series of brilliant and colorful land, water and aerial pageantry, and other activities for four wondrous days and nights.

The celebration is to be international in scope, for the \$35,000,000 bridge will break the last major water barrier to the north of San Francisco and offer a continuous highway between Canada and Mexico via San Francisco and the Redwood Empire along the northern coast of California.

The Army and Navy have pledged the fullest coöperation for the celebration and every available warship in the fleet in Pacific waters will be assigned to San Francisco harbor for the duration of the festivities.

On bridge-opening night, the warships will focus their powerful spotlights on the span, which will also be brilliantly illuminated with flood lights suspended from the high towers. Colored bombs bursting in air, together with a mile-wide display of fireworks, will signalize the first formal illumination of the great bridge.

The Golden Gate Bridge, financed by public bond issues in San Francisco and five Redwood Empire counties, is even more spectacular than the state-operated and federal-financed San Francisco-Oakland bay bridge, which connects San Francisco with Oakland and cities on the east and which was opened last November.

As the highest and longest single span suspension bridge in the world, the Golden Gate Bridge has a main span of 4,200 feet and an overall length of 9,200 feet. The main span is 700 feet longer than the George Washington Bridge across the Hudson River at New York City, and the towers are 150 feet higher; the towers are also 191 feet higher than the Washington monument. The floor of the bridge is 250 feet above the seven-mile an hour tides that continually sweep in and out of the entrance to San Francisco Bay.

Construction of the pier 1,200 feet offshore from the San Francisco side in 100 feet of water was one of the most daring and unusual in bridge-building history, being the first bridge pier built in an open sea. The work of this pier was carried on inside a permanent steel and concrete "fender pier" 750 feet in circumference and 115 feet high.

The steel towers, extending 746 feet above mean high water, will serve as aerial beacons and possibly for radio broadcasting. There will be complete independent telephone, fire and police telegraph systems on the bridge. The annual capacity of the span has been estimated as seventy million passenger cars and six million trucks.

Construction of the bridge was begun in January, 1933, and the cost of \$35,000,000 will be paid from collected tolls. Joseph B. Strauss is chief engineer of the structure.

The Golden Gate Bridge Fiesta in May will be a forerunner of the Golden Gate International Exposition in 1939 to celebrate completion of both the San Francisco-Oakland Bay Bridge and the Golden Gate Bridge.

International Conference on Fever Therapy.—In conjunction with the International Conference on Fever Therapy to be held at the Waldorf-Astoria Hotel on March 29 to 31, there will be a scientific and commercial exhibit staged.

The clinics will be held at the College of Physicians and Surgeons, Columbia University, New York City.

A large attendance of fever therapists from all over the world is expected. A very interesting and instructive program has been arranged, and all of those who plan to attend the conference are urged to register promptly with the general secretary, Dr. William Bierman, 471 Park Avenue, New York City. The registration fee is \$15.

Monthly Statement of Venereal Diseases Reported in California.—The Treasury Department of the Public Health Service, in its December report, gives the following figures for California:

State and Cities	Syphilis		Gonorrhea	
	Cases Reported During Month	Monthly Case Rates Per 10,000 Population	Cases Reported During Month	Monthly Case Rates Per 10,000 Population
California	1,508	2.67	1,542	2.73
Los Angeles*
Oakland	45	1.48	42	1.39
San Francisco	152	2.27	147	2.19

* No report for current month.

Social Security "Severance" Reports of Employees Leaving Service.—To insure eligible workers their full rights to benefits under the unemployment compensation provisions of the Social Security Act, the National Social Security Board has ruled that wage-earners shall not be required to sign "severance" reports. This is a form on which the employer reports to his State unemployment compensation administration when any employee subject to the law leaves his employ, giving the reasons therefor.

The purport of this ruling, which now becomes effective in the thirty-five states and the District of Columbia having unemployment compensation laws approved by the Board, will be to protect workers from being virtually forced into agreeing to postponement or possible loss of their unemployment compensation benefits. . . .

When Employer Voluntarily Pays Employees' Tax.* United States Commissioner of Internal Revenue Guy T. Helvering announced that amounts voluntarily paid as employees' tax by an employer, without collecting such amounts from his employees, are not wages subject to the taxes under Title VIII of the Social Security Act.

Title VIII of the Social Security Act imposes two taxes, an income tax on employees and an excise tax on employers, both of which became effective January 1, 1937. The initial rate of each of these taxes is one per cent of the wages of the employee. The law makes provision for the employer to collect the income tax on employees by deducting the amount thereof from the wages of each employee when they are paid.

After the close of each calendar month both the amount of the tax on the employer and, whether or not collected from his employees, the amount of the employees' tax must be paid by the employer to the collector of internal revenue. The taxes with respect to all taxable wages paid by the employer during a calendar month are required to be paid to the collector within the succeeding month. Form SS-1, the monthly return to be used by employers for this purpose, is available at the offices of all Collectors of Internal Revenue.

A number of employers have made known a desire to pay the employees' tax under Title VIII without deducting the tax from the remuneration of their employees. They have requested a ruling whether the amount so paid by them will itself be subject to the taxes under that title of the Act. The amount of the employees' tax in such case, if voluntarily paid by an employer, is not considered as additional wages subject to either the employer's tax or employees' tax imposed by Title VIII of the Act.

* See also item in Special Articles in this issue of CALIFORNIA AND WESTERN MEDICINE, on page 214.

LETTERS

Concerning the fight against syphilis.

TREASURY DEPARTMENT
PUBLIC HEALTH SERVICE
WASHINGTON

January 28, 1937.

To the Editor:—I wish to thank you for your letter of January 15 and the copy of the January issue of CALIFORNIA AND WESTERN MEDICINE. Your editorial, entitled "The Fight Against Syphilis: Long Delayed, Off on a Good Start," has been read with considerable interest, and I hope, as you say, that the time is now ripe for a well-organized campaign and that the funds available through the Social Security Act will stimulate this work in State and local health departments.

Sincerely yours,

R. A. VONDERLEHR,
Assistant Surgeon-General,
Division of Venereal Diseases.

Concerning "throw-away" publications.

January 20, 1937.

To the Editor:—There is an increasing tendency of some so-called "throw-away" publications to reprint, without permission, material appearing in the more ethical medical publications.

At the last meeting of the Committee on Publication of the Official Journal of the Minnesota State Medical Association it was decided to formally notify such publications not to reprint any material from *Minnesota Medicine* without written permission from the Editor or the Committee on Publication.*

It is our opinion that if every recognized medical publication would take similar action, it would materially aid in correcting a practice that is both unfair and unethical. *Minnesota Medicine* is sending a notice to four such publications (Medical Economics, Modern Medicine, Current Medical Digest, and the New York Physician), by registered mail, return receipt requested, although we do not know at this time whether any of them have reprinted material without permission.

Very truly yours,

MINNESOTA MEDICINE.
C. B. DRAKE, Editor.

Concerning silicosis.

To the Editor:—The Medical Committee of the Air Hygiene Foundation of America, 4400 Fifth Avenue, Pittsburgh, Pennsylvania, headed by Dr. A. J. Lanza, Chairman, announces the completion of a comprehensive treatise on "Silicosis and Allied Disorders." The Committee has attempted to bring together in one report a summary of those phases of pneumoconiosis which have been the subject of research, those which have been settled more or less conclusively, and those demanding further investigation.

The report, designed for industrialists as well as physicians, offers a practical, six-point program of health control for the "dusty trades." Recommendations for research along four fundamental lines are submitted to the Foundation in the report. These researches represent those which the Committee agrees are most urgently needed at the present time to increase our knowledge of pulmonary diseases which may result from air pollution. . . .

The conclusion of the report is a summary, which follows:

The extensive studies of silicosis in this country and abroad have given us a very clear idea of the cause of this disease, its pathology, its complications, and its prognosis. On the basis of our present knowledge, it may be said that:

1. Silicosis results from the inhalation of dust containing free silica.

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